A LECTURE

ENTITLED

A THERAPEUTIC RETROSPECT.

Delivered at the Opening of the Winter Course on Therapeutics at Glasgow University.

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IN the opening lecture to his class, Dr. Charteris, after a few introductory remarks, directed the attention of the students to a "Therapeutic Retrospect" extending over nearly twenty-five years. He stated that, like most graduates who had attended the instruction of Professor Hughes Bennett, he left the University of Edinburgh, believing little in the medicinal treatment of disease. Referring to the influence of Dr. Bennett, he stated that: "He was a man gifted with a rare fluency of diction, with a strong controversial spirit, and with a great hatred of shams. He loved to pulverise the old tenets of therapeutics. He lashed with ridicule the blood-letting and mercurial treatment of inflammation, and stood in triumphant scorn on the ruins he had made. He was by every one recognised as an excellent clinical teacher, a wonderful bedside instructor, and students trusted him as men only do once in their lifetime. And yet he was wrong in many of his arguments, wrong in much of his practice; and the principles he implanted were proved false by the experience of the present day." "The prospect was dreary then, but things have now greatly changed for the better," he continued; "as I shall attempt to show you by examples of present treatment in

"1. General diseases.

"2. Diseases connected with different systems of the body."

I. GENERAL DISEASES.

Rheumatism is a general disease. It cannot be referred to any one part. It invades all tissues. It encroaches on every system. It is a plain disease. Its features do not change, and it is indicated by signs certain, typical and characteristic. The chill, the fever, the swollen joints, the excessive pain, the sour-smelling perspiration, have been ever recognised by observers; and, though seldom fatal, it has been acknowledged in all medical treatises, as a malady which, by its sequelae, often shattered the active and useful life of peasant and artisan.

Its treatment has been shifting, marked by a succession of vaunted cures, which time showed to be vain and futile. By happy chance, at first, in interpreting nature, and by careful observation afterwards, Dr. MacLagan, a few years ago, intimated to the profession the antidote for rheumatism.

He saw where ague develops, in primeval forests, there also the stately cinchona grows. Rheumatism, as a rule, attacks those who live where the soil is wet, where the damp is great; and in such positions, also in wayside places, in marshy ground, and by sluggish streams, the graceful willow bends.

So salicin, obtained from the willow, Dr. MacLagan imagined, might cure rheumatism; and he was right, for all experience shows its action is as certain in that fever as quinine is in ague.

Let us turn now from this typical general disease, to look at some of those ailments which attack the system, into which the body has for convenience been divided.

II. DISEASES CONNECTED WITH DIFFERENT SYSTEMS OF THE BODY.

A. *Disease of the Respiratory System.*—A man is exposed to cold. A stitch settles in the side. The temperature rises. The hurried breathing, the rusty expectoration, the marked crepitation, betoken inflammation of the lung, and we know by these and other signs that the patient has pneumonia. Disease here marches rapidly. What is to be done? Twenty-five years ago the answer by some was, "Bleed, and the patient will recover." By others, "No. Bleed, and the patient will die." These views were pronounced, and they were antagonistic. They emanated from high authorities, and, in reflecting on them, it is little to be wondered that the medical student of that time was bewildered and confused, and, in very helplessness, slid into an expectant treatment, waiting for something to turn up.

Now, the line of therapeutics seems clearly marked out, varying only with the varying condition of the patient. This being rightly

apprehended, it is distinctly shown that in some cases of pneumonia a depressant antimonial treatment is advisable, while in others a stimulant method is necessary. Thus, by a careful selection of medicines and of diet, a successful issue may be predicated in the great majority of cases of lobar pneumonia.

B. *Diseases of the Circulatory System.*—The man who is ill with heart-disease has symptoms very painful and very typical to indicate its seat. He lies propped up in bed; his face is anxious, his countenance pale; sleep cannot be won, for the labouring heart affords no anaemia to the wearied brain. "I am tired and worn," says such an one; "may the end come, and that speedily." But yet grave though the surroundings are, our efforts are not unavailing. We may relieve, though we cannot cure. We can give little resting-places from suffering to him who is staggering under life's burden by the aid of digitalis and other cardiac tonics. We thus do good, and, from fitful spurts of activity, we bring the organ to a similitude of the steady beat of health.

C. *Diseases of the Digestive System.*—Dyspepsia is the quack's emporium; advertisements of stomach- and liver-pills evince this. With ingenious force and reiteration they excite alarm and proclaim a remedy. Fortunes have thus been made from a credulous public. Strong assertions, backed by active medicines of an unknown yet powerful cathartic character, will always find people ready to pay for the vendor's wares. While this is the case, I believe the patent medicines bearing on digestive derangement have had their day. We, in this country at least, are becoming more temperate. We live more on recognised and health-producing rules. We know that a careful dietary, abundant exercise, regular hours for sleep and work, will tide a man onwards to a green old age. The recent researches as to our various beverages—tea, coffee, cocoa, and alcohol, have been of infinite value, and solved many vexed questions. Yet, at times, medicines are necessary, more especially those which have a cholagogue action, and of these mercury has regained the reputation it for some time had lost. In the crusade against antiphlogistics, mercury fell maimed and crippled; men asserted that it was the direst curse of humanity. Some said, "Banish it from every pharmacopœia"; others, "place it in the museum of therapeutics." In common, everyday life, a good name may be smirched by abuse; but yet, if the accusation is untrue, the man or woman will rise, even in their lifetime, pure and clean in the noonday heat of public opinion. So also has it been in therapeutics with mercury. It is now recognised to have a decided action in eliminating bile. The jaundiced eye becomes clear, the peevish temper and the splitting headache disappear under its judicious use; further, we know, externally, it stands now, in corrosive sublimate, as the first favourite in antiseptic dressings.

Moreover, we were trained to believe that all the horrors of syphilis in the middle ages, the necrosed jaws, the toothless gums, the cachexia and anemia of a sapped constitution, were due more to mercury than the disease for which it was given. We were instructed to lean on iodide of potassium, fresh air, and tonics, and this opinion of physicians was fortified by the high authority of Syme, with whose name the greatness of the Edinburgh Medical School will ever be entwined. It was a sore wrench to find that the means indicated were simply pottering with the disease mentioned, and, if success was to be gained, we had to resort to the much-abused drug in which our forefathers trusted.

D. *Diseases of the Nervous System.*—We can percuss, listen to and understand by care and attention, the diseases of other systems, but the brain, with its convolutions, we cannot in life see or handle. Hence it is that the nervous system has to some extent been a *terra incognita*, and many theories, fluctuating and crude, have swept across the field of cerebral pathology. Yet, rays of light are now shining on the darkness. Ferrier's able researches have been utilized, and a bright page is opening up at the present moment in surgical operations on the seat of Reason and Will. It is refreshing to read how, in some cases, the nidus of epileptic attacks has been carefully diagnosed and relief given to sufferers from a distressing and enfeebling malady. If we consider hydrophobia a disease of the nervous centres, we must admit Pasteur's discovery, now, I think, fully proved as the most important epoch in the therapeutics of this century. He has succeeded when all other means had failed. He has rescued a dreadful and awful malady from the pale of incurable disease. These results are the best criticism to those who sentimentally urge the present continuance of the abolition of all original research in this country.

Electricity has spanned continents and bridged oceans, and by it we are in familiar momentary intercourse with all the centres of the world's activity. Its utility in grave affections of the nervous system is very doubtful, but it has a prophylactic influence, which cannot be gainsaid. Thus, early symptoms of failing physical powers due to nervous derangement, may be arrested, and average health retained.

Judiciously used, also, this influence gives refreshing intervals of repose to those who are stricken with paralysis, or are afflicted with a disease which can only terminate in death.

PHARMACOPŒIA OF 1885.

We have welcomed into the new *Pharmacopœia*, after their worth had been verified, some important remedies; and by doing this, official sanction has been given to new modes of treatment. By the discovery of the anæsthetic local properties of cocaine, the surgeon can, in delicate operations on the eye and on the throat, use the knife with painless certainty. The kidney burdened with congestion can be relieved by the vicarious perspiration resulting from pilocarpine; alarming hæmorrhage can be arrested by the injection of ergotine; and habitual constipation in many cases cured by cascara sagrada. A direct and sure method of attacking psoriasis is ensured by the ointment of chrysarobin, and the same drug given in small doses internally checks, according to some late researches, the acute stage of eczema.

The Committee of the *Pharmacopœia* have also acted well in expunging several obsolete medicines, and have exercised a wise discretion in not admitting into the official rank substances which, though loudly advocated, had no genuine title for admission.

HEALTH-RESORTS AND CLIMATE.

When the *Pharmacopœia* fails, we can supplement it by other means, for the resources of the physician are not exhausted. Nature is a wonderful restorer of lost health. From great depths, in some cases dependent on volcanic forces, there springs up in favoured places earth's remedy for some human ailments. Pure and sparkling with surcharged gas, this pleasant beverage can be retained by the stomach without heaviness or nausea. The salts contained are thus easily assimilated by the system, and the glow of health in time mantles on the countenance of the invalid.

These places were at one time scoffed at by those who had never seen them, but a better appreciation of their worth has dismissed this feeling. Facts are things that "winna ding," and these evince that when the wisdom of Cavendish Square and Harley Street fails to relieve gout, sufferers can be successfully ordered to drink the famed Elizabethan of Homburg, the effects of which are aided by climatic influences and by the cool breezes of the Taunus Mountains. So also the crippled joints become supple under the warm waters of Wiesbaden and Bath, and rheumatic pains disappear with the tepid neutral springs of Wildbad and Buxton. When the syphilitic poison has lurked long in the system, there is no agent so potent for eliminating it as the sulphur contained in the spas of Aix-la-Chapelle or Neuenahr.

And for the man tired with business or wearied with the toil of literary work you can recommend with confidence the breezes of the Atlantic. There, on a well-appointed and efficiently-manned steamer, every comfort is secured and a tonic is imbibed, freed from land surroundings and cares. No letter has to be answered, no proof-sheet has to be corrected, no telegrams arrive, and no duns harass. There is rest, complete rest, and a man becomes, as it were, a child in his hopes, amusements, and his pursuits. A sea voyage is charming when the barometer is high, and when the waves, glistening in the sun's rays, or silvered with the sheen of the moon, lap the vessel with the kiss of friendship. And when the scene is changed, when the storm arises, the winds roar, and the sky is black and leaden, yet, even then, the immensities of the ocean teach us lessons of our littleness and feebleness, and reveal the greatness of Almighty power.

Dr. Charteris concluded by saying—I have shown you progress, be it yours to advance this; be enthusiastic; believe in the tools of your life's work; assume not the sceptic's mantle; a sceptical young physician requires to alter his ways before he can be a trusted senior. You have enlisted in the ranks of a noble profession, guard its honour as you would guard the repute of your mother's name. Remember the words of Thomas Carlyle: "Often I have said, what profession is there equal in true nobleness to medicine? He that can abolish pain, relieve his fellow mortal from sickness, he is the indisputably usefulest of all men. Him savage and civilised will honour. He is in the right, be in the wrong who may. As a Lord Chancellor, under one's horsehair wig there might be misgivings; still more as a Lord Primate under one's cauliflower; but if I could heal disease, I would say to all men and angels without fear—*En, ecce!*"

A CREMATION was performed at the Cremation Society's Crematorium, St. John's, Woking, on Wednesday. The remains were those of an elderly lady, who expressed a wish that her body should be disposed of in this way after death.

ABSTRACT OF A PAPER ON THE GENERAL PRINCIPLES INVOLVED IN THE OPERATION OF REMOVAL OF THE UTERINE APPENDAGES.

Read before the Medical Society of London, November 1st, 1886.

By LAWSON TAIT, F.R.C.S.,

President of the British Gynecological Society.

[THE author was chiefly desirous of raising a discussion on this question on account of a paper which had appeared from the pen of Sir Spencer Wells in the *International Journal of the Medical Sciences*, which indicated a much nearer approach to a common understanding upon it than has yet appeared possible between the two schools of gynecology, the old and the new. The only parts of that paper with which he was inclined to take any exception were its peroration, and one or two other passages where Sir Spencer seemed inclined to find fault with others in a new line of surgical enterprise, just as he himself and his own work had been condemned about twenty-five years ago. Also upon one or two points where Sir Spencer Wells had misunderstood the writer and the views which he had expressed.]

Concerning the numbers of such operations performed, or the numbers which ought to be performed, no conclusion can be arrived at until the general principles upon which the operations are to be admitted are settled; and therefore these numbers, whilst relatively great, or absolutely so, may safely be left for future consideration.

The first of the general principles was that of nomenclature, and the author was glad to find that the word "spaying" had been discontinued, because, on precisely the same grounds, obstetric physicians, who perform the operation for the induction of premature labour, would come to be called "abortion-mongers." The offensive incorrectness of the word was, in this way, easily settled, and probably the last of it had been heard. A new word—"castration"—had been introduced, copied from the German and French, and this was equally open to objection, because, so far, it was a word which had been confined exclusively to operation performed upon the male. To confuse so simple and easy an operation as that with operations so difficult and so much more risky, for the removal of uterine appendages in women, was a serious surgical blunder; for the word castration, if it referred at all to the female organs, must refer to the ovaries, and must necessarily mean a double operation. Many of the operations, on the contrary, for the removal of the uterine appendages, were single, and in some there was no reason for the removal of the ovary at all, as when only one tube was of necessity removed. Such operations, therefore, could not by any possibility be brought under the word "castration;" whilst, on the contrary, the term "removal of the uterine appendages" included all such operations permitting of easy classification into different kinds. The use of the word "castration," or such words as "oophorectomy" and "normal ovariotomy" were fertile sources of confusion, as was abundantly evident in the article by Sir Spencer Wells, now under consideration.

It must be perfectly evident that such an operation as for the removal of both sets of uterine appendages for bleeding myoma was an altogether different thing from the removal of one set of them for chronic inflammatory disease. The two operations, therefore, if they had attached to them the word castration, would inevitably involve us in confusion. The confusion is evident in Sir Spencer Wells's article, because he seems to assume that the removal of the uterine appendages has an argument against it, in that it involves the non-production of the whole series of beings that might result from the subjects of the operation. This would, of course, be an argument if the operation were really castration; but as it is only, in the great bulk of cases, removal of organs already rendered perfectly useless by disease—permanently and irreparably so,—the word castration inevitably leads us into error. Sir Spencer Wells admits in this paper that "the operation may be performed in certain cases of bleeding myoma;" but, as he puts the mortality of it at 14.6 per cent., it is natural enough to find that he is inclined to restrict it. As the mortality in the writer's practice is less than 2 per cent., the operation may be considerably extended for the relief of suffering, and the prevention of, or relief of, impoverished health.

Again, Sir Spencer admits that "it is to be resorted to in certain malformations of the genital organs, deformities of the pelvis, and accidental obstructions of the vagina,"—conditions in which sterility puts the argument against it out of court altogether; and here again the diminished mortality raises the question of how far it may be extended in the relief of the great suffering involved in the insufficient development of the uterus. A similar conclusion can be established,